

● PRINTER RUSH ●
(PTO ASSISTANCE)

HC Corr

Application :	10/10/05, 952	Examiner :	Nguyen
From:	BAB	Location:	ICD <input checked="" type="checkbox"/> FMF <input type="checkbox"/> FDC
			Date: 11/15/04
Tracking #:		Week Date:	

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	1-27-04	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please provide new Index
of Claims. (for Amst 4-22-04)

*Thank You
CJ*

[XRUSH] RESPONSE:

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04